

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 12, 2009
Secretary of State**

DOCUMENT# P04000131396

Entity Name: ONE SOURCE DISTRIBUTION CENTER, INC.

Current Principal Place of Business:

290 SW 12TH AVE.
STE. 8
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

290 SW 12TH AVE.
STE. 8
POMPANO BEACH, FL 33062 US

New Mailing Address:

FEI Number: 56-2480260 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATISTA, OTTO
290 SW 12TH AVE.
STE. 8
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BATISTA, OTTO
Address: 415 NE 25TH STREET
City-St-Zip: WILTON MANORS, FL 33305 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OTTO BATISTA

PST

05/12/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date